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PTO/SB/31 (09-04)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>		Docket Number (Optional) 41482/205543						
<p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on <u>May 2, 2005</u>.</p> <p>Signature <u>Christopher J. Chan</u></p> <p>Typed or printed name <u>Christopher J. Chan</u></p>		<p>In re Application of Tallish et al.</p> <table border="1"> <tr> <td>Application Number 09/980,329</td> <td>Filed 03/05/2002</td> </tr> <tr> <td colspan="2">For Method and Kit for Cavitation-Induced Tissue Healing With Low Intensity Ultrasound</td> </tr> <tr> <td>Art Unit 3737</td> <td>Examiner Smith, Ruth S.</td> </tr> </table>	Application Number 09/980,329	Filed 03/05/2002	For Method and Kit for Cavitation-Induced Tissue Healing With Low Intensity Ultrasound		Art Unit 3737	Examiner Smith, Ruth S.
Application Number 09/980,329	Filed 03/05/2002							
For Method and Kit for Cavitation-Induced Tissue Healing With Low Intensity Ultrasound								
Art Unit 3737	Examiner Smith, Ruth S.							
<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner.</p> <p>The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) <u>\$ 500</u></p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: <u>\$ _____</u></p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed. <u>05/03/2005 EKULII 00000037 09980329</u></p> <p><input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <u>81 FC:1401</u> <u>500.00 OP</u></p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>11-0855</u>. I have enclosed a duplicate copy of this sheet.</p> <p><input type="checkbox"/> A petition for an extension of time under 37 CFR 1.138(a) (PTO/SB/22) is enclosed.</p>								
<p><b>WARNING:</b> Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the  <input type="checkbox"/> applicant/inventor.  <input type="checkbox"/> assignee of record of the entire interest.  See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed.  (Form PTO/SB/86)  <input checked="" type="checkbox"/> attorney or agent of record.  Registration number <u>44,070</u>.  <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34.  Registration number if acting under 37 CFR 1.34. <u>_____</u></p> <p><u>Christopher J. Chan</u> Signature _____ _____ <u>404-815-8500</u> Telephone number _____ <u>May 2, 2005</u> Date _____ <u>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</u></p>								

\*Total of \_\_\_\_\_ forms are submitted.

This collection of information is required by 37 CFR 41.31. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11, 1.14 and 41.6. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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www.KilpatrickStockton.com

May 2, 2005

**FAX**

RECIPIENT/ PHONE NO.	FAX NO.	COMPANY/ CITY, STATE, COUNTRY
MAIL STOP AF Centralized Fax Dept. GAU 205543 R. Smith	703.872.9306	U.S. Patent and Trademark Office Alexandria, VA 22313-1450

Christopher J. Chan14

FROM

PAGES (WITH COVER)

664841482/205543

REFERENCE NO

CLIENT/MATTER NO.

**PLEASE CALL 404 815 6497 IF YOU HAVE DIFFICULTY WITH THIS TRANSMISSION.****CONFIDENTIALITY NOTE:**

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**COMMENTS**

Applicant:	<u>Talish, et al.</u>
Title:	METHOD AND KIT FOR CAVITATION-INDUCED TISSUE
	HEALING WITH LOW INTENSITY ULTRASOUND
Serial No./Docket No.:	<u>09/980,329</u>
Filed:	<u>41482/205543</u>
	<u>11/19/01</u>

**PAPERS SUBMITTED:**

1. PTO/SB/21 -Transmittal;
2. Fee Transmittal
3. Amendment/Response;
4. Notice of Appeal.
5. Credit Card Payment Form PTO-2038

Date: May 2, 2005

By: Christopher J. Chan, Reg. No. 44,070

**TO BE COMPLETED BY KS OPERATIONS CENTER****TRANSMISSION RECEIPT DATE/TIME:** \_\_\_\_\_**COMPLETED BY:** \_\_\_\_\_**JOB CODE** 34940

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission	Attorney Docket Number
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Application Number	09/980,329
Filing Date	03/05/2002
First Named Inventor	Talish et al.
Art Unit	3737
Examiner Name	Smith, Ruth S.

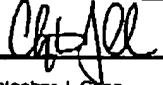
**ENCLOSURES (check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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**Remarks**

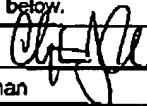
Notice of Appeal PTO/SB/31  
PTO-2038

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm	KILPATRICK STOCKTON LLP		
Signature			
Printed Name	Christopher J. Chan		
Date	May 2, 2005	Reg. No.	44,070

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature			
Typed or printed name	Christopher J. Chan	Date	May 2, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

## FEE TRANSMITTAL for FY 2005

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 500)

Complete If Known	
Application Number	09/860,829
Filing Date	03/05/2002
First Named Inventor	Talish et al.
Examiner Name	Smith, Ruth S.
Art Unit	3737
Attorney Docket No.	41482/205543

**METHOD OF PAYMENT** (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify) : \_\_\_\_\_

Deposit Account Deposit Account Number: 11-0855 Deposit Account Name: Kilpatrick Stockton LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments

Under 37 CFR 1.16 and 1.17

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Fee(\$)	Fee(\$)	Fee(\$)	Fee(\$)	Fee(\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee(\$)	Fee Paid (\$)	Small Entity	
				Fee (\$)	Fee (\$)
-20 or HP=	x	=	_____	50	25
HP = highest number of total claims paid for, if greater than 20.				200	100
Total Claims	Extra Claims	Fee(\$)	Fee Paid (\$)	360	180
- 3 or HP=	x	=	_____	Multiple Dependent Claims	
HP = highest number of independent claims paid for, if greater than 3.				Fee (\$)	Fee Paid (\$)

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	_____

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge) : Notice of Appeal \$500

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	44,070	Telephone	404-815-6500
Name (Print/Type)	Christopher J. Choi			Date	May 2, 2005

This collection of information is required by 37 CFR 1.156. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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